



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 6844

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 09/537,998 | FILING DATE 03/29/2000 RULE | CLASS 709 | GROUP ART UNIT 2126 | ATTORNEY DOCKET NO. MSFT115144 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

David D'Souza, Mercer Island, WA;

**** CONTINUING DATA *******

This application is a CIP of 08/667,377 06/21/1996 PAT 6,052,707
 which is a CON of 08/125,930 09/21/1993 ABN

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE
 GRANTED

**** 05/30/2000**

| | | | | | |
|--|--|-------------------------|-----------------------|---------------------|---------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| Verified and Acknowledged | Examiner's Signature <u>SAC</u> Initials | WA | 11 | 15 | 7 |

ADDRESS

26389
 CHRISTENSEN, O'CONNOR, JOHNSON, KINDNESS, PLLC
 1420 FIFTH AVENUE
 SUITE 2800
 SEATTLE, WA
 98101-2347

TITLE

Preemptive multi-tasking with cooperative groups of tasks

| | | |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext.) |

| | | |
|------------------|------------------------------------|--|
| RECEIVED 1002 | No. _____ to charge/credit DEPOSIT | of time) |
| | ACCOUNT | <input type="checkbox"/> 1.18 Fees (Issue) |
| | No. _____ for following: | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |